

| (Requestor's Name)                      |
|---|
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| (City/State/Zip/Phone #)                |
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| (Business Entity Name)                  |
|   |
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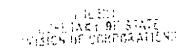
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20 JAN 27 AM 8: 44



## COVER LETTER



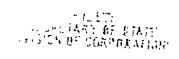
**TO:** Amendment Section Division of Corporations

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| NAME OF CORPO                           | ORATION: Weber Design Gro                  | oup 2, Inc                                     |   |
|---|--|--|---|
|   | IBER:                                      |  | _   |
| The enclosed Article                    | s of Amendment and fee are st              | ibmitted for filing.                           |   |
| Please return all corr                  | espondence concerning this ma              | ntter to the following:                        |   |
|   | Dolores Trapani                            |  |   |
|   |  | Name of Contact Person                         | 1   |
|   | Weber Design Group 2, Inc.                 |  |   |
|   |  | Firm <sup>/</sup> Company                      |   |
|   | 8970 Fontana del Sol Way, S                | Suite #2                                       |   |
|   |  | Address  |   |
|   | Naples, FL 34109                           |  |   |
|   |  | City/ State and Zip Cod                        | e   |
|   | dtrapani@wdg-architecture.c                | rom  |   |
|   | . •  | sed for future annual report                   | notification)   |
| For further information Dolores Trapani | on concerning this matter, plea            |  | 594-9778  |
| Name                                    | of Contact Person                          | Area Co  | ) 594-9778<br>de & Daytime Telephone Number                                 |
| Enclosed is a check t                   | for the following amount made              | payable to the Florida Depa                    | artment of State:   |
| S35 Filling Fee                         | □\$43.75 Filing Fee &                      | □\$43.75 Filing Fee &                          | □\$52.50 Filing Fee   |
| ZEVIDUSLY<br>SUBHITT                    | Certificate of Status                      | Certified Copy (Additional copy is 4 enclosed) | Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
|   | ailing Address                             |  | Address   |
|   | nendment Section<br>vision of Corporations |  | Iment Section<br>on of Corporations   |
|   | D. Box 6327                                | The C  | entre of Tallahassee  |
| Та                                      | llahassee, FL 32314                        | 2415 7   | N. Monroe Street, Suite 810   |

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of



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Weber Design Group 2, Inc.

| (Name of Corporatio   | n as currently filed with the Flori  | da Dept. of State)                         |
|---|--------------------------------------|--|
| P18000070310  |                                      |  |
| (Docume   | ent Number of Corporation (if know   | m)   |
| Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:  | Statutes, this Florida Profit Corpor | ation adopts the following amendment(s) to |
| A. If amending name, enter the new name of the col  | rporation:                           |  |
| WDG Architecture NAPLES Inc.  |                                      | The new                                    |
| name must be distinguishable and contain the word "con<br>"Inc.," or Co.," or the designation "Corp." "Inc.,"<br>"chartered," "professional association," or the abbrev | or "Co". A professional corpor       | orated" or the abbreviation "Corp.,"       |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u>   |                                      |  |
| C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BON</u>   | <u></u>                              |  |
| D. If amending the registered agent and/or registered new registered agent and/or the new registered of   |                                      | the name of the                            |
| Name of New Registered Agent  |                                      |  |
|   | (Florida street address)             |  |
| N 5 : 106 (11 -   | ,                                    | 171 - 21 -                                 |
| New Registered Office Address:  | (City)                               | , Florida<br>(Ztp Code)                    |
| New Registered Agent's Signature, if changing Regi-<br>I hereby accept the appointment as registered agent.—I   |                                      | ligations of the position.                 |
| Signa   | ture of New Registered Agent, if cha | mging                                      |
| Check if applicable   |                                      |  |

 $\square$  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President: T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doc is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

| X Change                      | <u>1'T</u>      | John Do      | <u>e</u> |                 |
|-------------------------------|-----------------|--------------|----------|-----------------|
| X Remove                      | $\underline{V}$ | Mike Jo      | nes      |                 |
| X Add                         | <u>sv</u>       | Sally Sn     | nith     |                 |
| Type of Action<br>(Check One) | <u>Title</u>    | -            | Name     | <u>Addres</u> s |
| 1) Change                     |                 | _            |          |                 |
| Add                           |                 |              |          |                 |
| Remove                        |                 |              |          |                 |
| 2) Change                     |                 | <del>_</del> |          |                 |
| Add                           |                 |              |          |                 |
| Remove 3.1 Change             |                 | _            |          |                 |
| Add                           |                 |              |          |                 |
| Remove                        |                 |              |          |                 |
| 4) Change                     |                 |              |          |                 |
| Add                           |                 |              |          |                 |
| Remove                        |                 |              |          |                 |
| 51 Change                     |                 |              |          |                 |
| Add                           |                 | <del></del>  |          |                 |
| Remove                        |                 |              |          |                 |
|                               |                 |              |          |                 |
| 6) Change                     |                 | _            |          |                 |
| Add                           |                 |              |          |                 |
| Remove                        |                 |              |          |                 |

| г. <u>II а</u><br>(Ап | mending or adding additional Articles, enter change(s) here: sech additional sheets, if necessary). (Be specific)  |
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| E IC.                 | n amendment provides for an exchange, reclassification, or cancellation of issued shares,  |
| r. <u>11 a</u><br>pr  | ovisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)   |
|                       | (if not applicable, indicate N/A)  |
|                       |  |
|                       |  |
|                       | <u> </u>   |
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| te this document was signed fective date if applicable:  ote: If the date inserted in the content of the date inserted in the date. | (no more than 90 days after amendment file date)  |
|--|---|
|  | (no more than 90 days after amendment file date)  |
| te: If the date inserted in  | (no more than 90 days after amendment file date)  |
| te: If the date inserted in  |   |
|  | this block does not meet the applicable statutory filing requirements, this date will not be listed he Department of State's records.   |
| loption of Amendment(s)  | ( <u>CHECK ONE</u> )  |
| The amendment(s) was/wer action was not required.  | re adopted by the incorporators, or board of directors without shareholder action and shareholder   |
| The amendment(s) was/web by the shareholders was/web.  | re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.  |
|  | re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):  |
| "The number of votes   | s cast for the amendment(s) was/were sufficient for approval  |
| by   | (voting group)  |
| se   | by a director president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court oppointed fiduciary by that tiduciary) |
|  | ·   |
|  | The amendment(s) was/wer action was not required.  The amendment(s) was/wer by the shareholders was/wer must be separately provide.  "The number of votes by  |